

CABINET FOR HEALTH AND FAMILY SERVICES DEPARTMENT FOR COMMUNITY BASED SERVICES

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Contract Correspondence Transmittal (CCT)

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Division/Branch: Protection and Permanency/OOHC	
Key Words/Phrases: Adam Walsh	
Attachments/Forms:	

Dear PCP Provider,

order to comply with The Adam Walsh Child Protection and Safety Act of 2006 (Public Law 109-248) and to expedite the process in which out of state child abuse/neglect (CA/N) checks are completed, the Records Management Section has created has created a website (http://chfs.ky.gov/dcbs/adamwalshforms.htm) to list each state's requirements. Agency staff can access state forms and provide to the applicants for completion, as applicable. Please share this website with applicable staff where they will find additional information about this process. We are asking that private agency staff complete and sign any applicable state forms with each adult needing a background check and have the adult take the designated form along with the DPP-157, DPP-159 and proof of identification to one of the 18 regional fingerprint scan locations.

As previously indicated in a memorandum sent 6/13/08, please contact the local designated DCBS office prior to sending any applicant or adult household member for a fingerprint scan. If an appointment is scheduled and the applicant is unable to attend, please contact the local DCBS office as a courtesy.

If you have any questions concerning this process, please contact Jennie Willson via email <u>Jennie.Willson@ky.gov</u>. If you have questions about the website, please contact Rosa Browning with the Records Management Section at mailto:rosa.browning@ky.gov.

Thank you in advance for your assistance.

Sincerely,

ichael Cheek

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